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## APPLICANTS

Syed Shoaib Hasan Zaidi, Poughkeepsie, NY;

Gangadhara S. Mathad, Poughkeepsie, NY;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/26/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met. <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature _____ Initials _____	NY	4	21	3

## ADDRESS

F Chau & Associates LLC  
1900 Hempstead Turnpike  
Suite 501  
East Meadow, NY  
11554

## TITLE

Optical measurement of planarized features

FILING FEE  RECEIVED 858	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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